
County: Ozaukee LASATA CARE CENTER W76 N677 WAUWATOSA ROAD CEDARBURG 53012 W/O NO// WAUWATUSA ROAD
CEDARBURG 53012 Phone: (262) 377-5060
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 204
Total Licensed Bed Capacity (12/31/00): 204
Number of Residents on 12/31/00: 199 Ownership: Highest Level License: Operate in Conjunction with CBRF? Title 18 (Medicare) Certified? County Skilled No Yes Average Daily Census: 194

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00) %				
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	%	Age Groups	% 	Less Than 1 Year	23. 1 45. 7
Supp. Home Care-Household Services	No	Developmental Disabilities	0. 5	Under 65	6. 5	More Than 4 Years	31. 2
Day Servi ces	No	Mental Illness (Org./Psy)	36. 2	65 - 74	6. 0		
Respite Care	No	Mental Illness (Other)	14. 6	75 - 84	29. 1		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49. 7	**********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	1.5	95 & 0ver	8. 5	Full-Time Equivale	
Congregate Meals	No	Cancer	2. 5			Nursing Staff per 100 R	esi dents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	11. 1	65 & 0ver	93. 5	[
Transportation	No	Cerebrovascul ar	5. 0			RNs	12. 2
Referral Service	No	Di abetes	2. 5	Sex	%	LPNs	4. 0
Other Services	No	Respi ratory	2. 0			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	24. 1	Male	25.6	Aides & Orderlies	36. 2
Mentally Ill	No			Female	74. 4		
Provi de Day Programming for			100. 0				
Devel opmental ly Di sabled	No		***		100.0		************

Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			Other Priv		rivate Pay		 I	Manageo	d Care	Percent		
			Per Die	em	n Per Diem				Per Diem			Per Diem		Per Diem Total			Of All
Level of Care	No.	%	Rate	No.	. %	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	1	0. 7	\$123. 25	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	1	0. 5%
Skilled Care	1 0		\$288. 01	$12\overline{2}$	87. 1	\$103.71	ŏ	0. 0	\$0.00	38		\$156.00	ŏ	0. 0	\$0.00	$17\overline{0}$	85. 4%
Intermediate				17	12. 1	\$84. 16	0	0.0	\$0.00	11	22.4	\$143.00	0	0.0	\$0.00	28	14. 1%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Venti l ator- Depender	nt 0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	10	100.0		140	100. 0		0	0.0		49	100.0		0	0.0		199	100.0%

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Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needing Total Assi stance of Activities of % Totally Percent Admissions from: Number of Private Home/No Home Health Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents 11.0 Private Home/With Home Health 3. 7 Baťhi ng 0.0 49.7 50. 3 199 Other Nursing Homes 15.9 Dressi ng 18.6 70.4 11. 1 199 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Transferri ng 199 63.4 40.7 51.8 7. 5 28.6 199 0.0 Toilet Use 56. 3 15. 1 199 0.0 Eating 47. 7 47.2 5. 0 Other Locations 6. 1 Total Number of Admissions 82 Continence Special Treatments Receiving Respiratory Care Receiving Tracheostomy Care Receiving Suctioning Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 7. 5 3. 0 Private Home/No Home Health 14.3 Occ/Freq. Incontinent of Bladder 44.7 0.0 Private Home/With Home Health Occ/Freq. Incontinent of Bowel 34. 2 0.0 7. 1 Other Nursing Homes 4.3 2.0 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 5.7 0.0 Mobility Physically Restrained 1.5 0.0 35. 2 0.0 Other Locations 5.7 Skin Care Other Resident Characteristics Deaths 62.9 With Pressure Sores 4. 5 Have Advance Directives 92.0 Total Number of Discharges With Rashes Medi cati ons 8. 5 Receiving Psychoactive Drugs (Including Deaths) 54. 3

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		Ownershi p:		Bed	Size:		ensure:		
	Thi s	Government		200+		Skilled		Al l	
	Facility	Peer Group		Peer	Group	Peer Group		Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95. 1	92. 1	1.03	80. 3	1. 18	81. 9	1. 16	84. 5	1. 13
Current Residents from In-County	81. 4	83. 2	0. 98	84. 7	0. 96	85. 6	0. 95	77. 5	1.05
Admissions from In-County, Still Residing	52. 4	51. 2	1. 02	28. 9	1.82	23. 4	2. 24	21. 5	2.44
Admissions/Average Daily Census	42. 3	50 . 5	0.84	96. 3	0.44	138. 2	0. 31	124. 3	0.34
Di scharges/Average Daily Census	36. 1	41. 7	0. 87	100. 6	0. 36	139. 8	0. 26	126. 1	0. 29
Discharges To Private Residence/Average Daily Census	7. 7	6. 5	1. 18	26. 4	0. 29	48. 1	0. 16	49. 9	0. 16
Residents Receiving Skilled Care	85. 9	90. 1	0. 95	88. 4	0. 97	89. 7	0. 96	83. 3	1.03
Residents Aged 65 and Older	93. 5	95. 2	0. 98	90. 4	1.03	92. 1	1. 02	87. 7	1.07
Title 19 (Medicaid) Funded Residents	70. 4	65 . 9	1. 07	73. 5	0. 96	65. 5	1. 07	69. 0	1.02
Private Pay Funded Residents	24. 6	29. 3	0.84	18. 7	1. 32	24. 5	1.01	22. 6	1.09
Developmentally Disabled Residents	0. 5	1. 0	0. 52	1. 2	0.41	0. 9	0. 57	7. 6	0.07
Mentally Ill Residents	50. 8	34. 4	1.48	33. 1	1. 53	31. 5	1. 61	33. 3	1. 52
General Medical Service Residents	24. 1	12. 7	1.89	20. 6	1. 17	21.6	1. 12	18. 4	1. 31
Impaired ADL (Mean)	45. 4	45. 9	0. 99	52. 0	0. 87	50. 5	0. 90	49. 4	0. 92
Psychological Problems	54. 3	51. 9	1. 05	49. 4	1. 10	49. 2	1. 10	50. 1	1.08
Nursing Care Required (Mean)	6. 7	5. 9	1. 12	6.8	0. 97	7. 0	0. 95	7. 2	0. 93